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Division of Corporations

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From:

Account Name : EAGLE TAX REPRESENTATION, CORP.

Account Number : 120070000037

Phone Fax Number : (954)752-4553 : (954)752-4522

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \* \*

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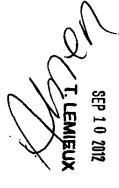
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COR AMND/RESTATE/CORRECT OR O/D RESIGN LC MARBLE & GRANITE, INC

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## COVER LETTER

то:	Amendment Section
	Division of Corporations

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bmitted for filing.	
tter to the following:	
RMO	
Name of Contact Persor	)
PRESENTATION	N, CORP
Firm/ Company	
D 7 STE 18	
Address	
EK, FL - 33073	
City/ State and Zip Code	e
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Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations a Building Executive Center Circle assee, FL 32301
	bmitted for filing.  tter to the following:  RMO  Name of Contact Person  PRESENTATION  Firm/ Company  D 7 STE 18  Address  EK, FL - 33073  City/ State and Zip Code  and for future annual report  see call:  at (954  Area Co  payable to the Florida Depayable to the Florida Depayable to the Florida Depayable to the Florida Copy  (Additional copy is enclosed)  Street  Amenic  Divisic  Clifton 2661 E

## Articles of Amendment to Articles of Incorporation of

LC MARBLE & GRANITE, INC
(Name of Corporation as currently filed with the Florida Dept. of State)
P07000113310
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co" or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
(Frincipal Office address MOST BE A STREET ADVINCESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:
Name of New Registered Agent
(Florida street address)
New Registered Office Address:, Florida
(City) (Zip Code 2)
ASA STATE OF THE S
SR 1
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President: T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe. PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add. Example:

X Change	<u>PT</u>	John Doe	
X Remove	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>∧ddres</u> s
1) Change	VP	Thamara M Lima	574 NE 42nd Ct
Add			Oakland Park, FL
X_Remove			33334
2) Change	D	Mauro S Lima	574 NE 42nd Ct
∧dd			Oakland Park, FL
X			33334
3)Change			
A <b>d</b> d			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove		4	
6) Change	-		
Add			
Remove			

ttach additional.	lding additional Art sheets, if necessary).	(Be specific)			
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<u>provisions for in</u>	provides for an exc aplementing the am table, indicate N/A)	hange, reclassin	cation, or cance ontained in the s	llation of issued amendment itsel	shares, f:
Α		···- <u>-</u> -			·
				<b></b>	

The date of each amendment(s) adoption: 09-07-2012
on or one amendment(s) adoption:
Effective date if applicable: 09-07-2012
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by
(voting group)
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated 09-07-2012
Signature <u>Maure S Line</u> (By a director, president or other officer – if directors or officers have not been
(By a director, president or other officer—if directors or officers have not been selected, by an incorporator—if in the hands of a receiver, trustee, or other court
appointed fiduciary by that fiduciary)
Mauro S Lima
(Typed or printed name of person signing)
Director
(Title of person signing)